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APPLICANTS

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** CONTINUING DATA ***** none/cn

** FOREIGN APPLICATIONS ***** none/cn

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 05/04/2004

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY OH	SHEETS DRAWING 4	TOTAL CLAIMS 14	INDEPENDENT CLAIMS 3
Verified and Acknowledged	Examiner's Signature _____ Initials <u>CN</u>				

ADDRESS

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TITLE

Coaxial cable termination system

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT	<input type="checkbox"/> All Fees
		<input type="checkbox"/> 1.16 Fees (Filing)
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